

**STATE OF MONTANA**  
**OFFICE OF THE STATE PUBLIC DEFENDER**  
**MISCELLANEOUS CLAIM FOR SERVICES**

Vendor ID #

- ☐ Investigator
- ☐ Expert Witness
- ☐ Transcripts/Depositions
- ☐ Research
- ☐ Mediator
- ☐ Other (Please Specify) \_\_\_\_\_

**Please attach your notice of pre-approval and an Itemized invoice for all work and/or costs on each case listed below.**

**The undersigned Counsel certifies that the cases listed, expenses claimed and the times reported are true and accurate**

Regional Director's or Conflict Coordinator's  
Approval/Date Approved

Contract Manager's Approval/Date Approved

**SIGNATURES ABOVE CERTIFY THAT ALL COSTS IN EXCESS OF \$200 HAVE BEEN PREAUTHORIZED.  
CONFLICT CASES: FAX TO KERRY NEWCOMER @ 406-327-0771 OR EMAIL TO K.NEWCOMER@GN-LAW.COM  
ALL OTHER NON CONFLICT CASES NEED TO BE SUBMITTED DIRECTLY TO THE RDPD FOR APPROVAL.**